

# FORM 104



## APPLICATION FOR ACCREDITED TRAINING UNIT (ATU)

**Who Will Use This Form:** This form will be completed by ATU applicant and their ATS.

**Directions:** The ATU applicant should 1) read and understand the NCCER's *Accreditation Guidelines*, 2) complete the application form, 3) submit form for ATS approval, and 4) submit approved form and application fee (\$50.00) to the NCCER Accreditation Department (check made payable to NCCER).

Upon receipt of approved form and fee, NCCER will contact the applicant regarding the status of the application. Contact NCCER Accreditation Department for more information.

**All Information MUST Be Completed • Please Type**

**Applicant Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Type of Organization: \_\_\_\_\_

**ATS:** \_\_\_\_\_

**Name/Title of ATU Representative:** \_\_\_\_\_ / \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Physical Address: \_\_\_\_\_ Physical Zip: \_\_\_\_\_

**Name/Title of Second ATU Contact:** \_\_\_\_\_ / \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Physical Address: \_\_\_\_\_ Physical Zip: \_\_\_\_\_

Type of Training (Electrical, Welding, Safety, Pipeline, etc.)	Estimated # of Trainees per Year	Estimated # of Instructors

# FORM 104 CONTINUED

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All Information MUST Be Completed • Please Type • Use additional sheets as needed for the following questions

Do you have Master Trainers certified by NCCER? \_\_\_\_\_

If yes, please list names and social security numbers. \_\_\_\_\_

Do you have Instructors certified by NCCER? \_\_\_\_\_

If yes, please list names and social security numbers. \_\_\_\_\_

Are you training in partnership with other organizations or associations?     Yes     No    Please explain.

I attest that this information is true, and that the ATU has read and agrees to abide by the conditions set forth in NCCER's *Accreditation Guidelines*.

\_\_\_\_\_  
ATU Representative Signature

\_\_\_\_\_  
Name/Title (*type or print*)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature Officer of ATU Organization

\_\_\_\_\_  
Name/Title (*type or print*)

\_\_\_\_\_  
Date

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## FOR ATS USE ONLY

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List on NCCER website:     Yes     No

**Registry Credentials:** (check one)     Send documents directly to ATU  
(transcripts, wallet card, certificate)     Send documents to ATS

Sponsor Name: \_\_\_\_\_

Sponsor Representative Signature: \_\_\_\_\_

Print Name/Title: \_\_\_\_\_

# FORM 104 CONTINUED

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This document is intended as a checklist to assist potential ATUs in assessing their program's status at the start of the accreditation process. Please check (✓) the appropriate box, Yes (  ) or No (  ). It should be understood that having a policy or circumstance in place does not imply that the ATU candidate is in compliance with NCCER policies and procedures.

1. Yes  No  The ATU has training goals and objectives.
2. Yes  No  There is a budgeting procedure in place for the program.
3. Yes  No  There is a procedure in place for evaluating the program.
4. Yes  No  The program has documented linkage to the construction/maintenance/pipeline industry.
5. Yes  No  The program has industry oversight that provides effective consultation and support including input into the program's overall planning, development, execution and evaluation. (i.e., Regularly scheduled meetings?)
6. Yes  No  Is there linkage for trainees from the program to the industry.
7. Yes  No  The program currently utilizes NCCER's *Contren*<sup>®</sup> *Learning Series* and NCCER's written and performance testing procedures.
8. Yes  No  The program currently uses instructors who are NCCER certified.
9. Yes  No  The program currently has an NCCER-certified Master Trainer.
10. Yes  No  The program currently provides for safety training for instructors and trainees.
11. Yes  No  The program currently provides instructors with Instructor Handbooks or procedures outlining classroom conduct and administrative requirements.
12. Yes  No  The program currently provides trainees with Handbooks outlining their classroom conduct and administrative requirements.
13. Yes  No  The program's classroom facilities provide sufficient area, seating, furnishings, and equipment including books, audio-visual, white boards, etc.
14. Yes  No  The program's laboratory facilities provide sufficient area, seating, furnishings, and equipment including tools, machines and materials to allow for both hands-on training and performance testing.
15. Yes  No  The program has sufficient first-aid, fire and safety equipment.
16. Yes  No  There is a safety program in place to provide adequate classroom, laboratory and job-site safety training for trainees and instructors.
17. Yes  No  Is there currently an industry career program in place?

**Mail to:** NCCER – Accreditation Department  
P.O. Box 141104  
Gainesville FL 32614-1104

OR

**Fax to:** (352) 334-0932